## CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

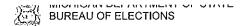
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	d signed by candidate.	3. This Statement covers:	om12/05/14	to 07/20	)/14
1. Committee I.D. Number		4. Candidate Last Name	Fin	st Name	M.I.
150688		Niedzinski	Andrev	٧	G
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)  Board Member - Local			
Committee to elect Andrew Niedzi	nski	4b. County of Residence BA		0	
5 Committee's Mailing Address 1911 15th st. 3ay City, MI 48708		6. Treasurer's Name & Reside Andrew Niedzinski 1911 15th st. Bay City, MI 48708	ential Address		
Area Code and Phone (989)992-7864 If the address in this box is different from the comm mailing address on the Statement of Organization, is be sent to this address by the filing official.	nittee mail may	7 WOO OOGO OF 1 110110 1	992-7864		
7. Treasurer's Business Address .		8. Designated Record Keeper Designated Record Keeper)	r's Name and Maiin	ANTENA A. LUCZ	committee has a
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:  Primary	Required ON is not on the current year:		by the committee to by discharged and	to the candidate of I forgiven and no he committee has	tify any outstanding debt or his or her spouse is here longer collectible from s no outstanding assets,
General Convention Special	October Q	·	Further, if the disso considered a reque	olution cannot be est for the Report	granted, that this be ting Waiver.
_	Annua	l Statement () Coverage Year	Effective	e date of dissoluti	on
School Caucus	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposit		nds must be reported on ge.
Date of Election, Convention or Caucus					
-					·
<ol> <li>Verification: I/We certify that all reasonable dilige my\our knowledge and belief the contents are true, a</li> </ol>	ince was used in accurate and co	n the preparation of this statement mplete.	ent and attached sci	hedules (if any) a	nd to the best of
Current Treasurer or Andrew Niedzin:	ski	· (////////////////////////////////////	## <i>#</i>	<u> </u>	7/25/2014
Designated Record Keeper Type or Print Name		Manature		Date	720/2014
Candidate Andrew Niedzinski		HT/	27	Date	7/25/2014
Type or Print Name		Signature			

## 1. Committee I.D. Number 150688

# SUMMARY PAGE CANDIDATE COMMITTEE

## 2. Committee Name Committee To Elect Andrew Niedzinski

RECEIPTS	Column I	Column II Cumulative this election cycle
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0</u>	,
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 0	(18.) \$ 0
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 0	(19.) \$ 0
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 0	(20.) \$ 0
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 0	(21.) \$ 0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0	(22.) \$ 0
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>364.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 364.00	(23.) \$ 364.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	:
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ 0	(24.) \$ 0
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11) Y	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
<ul> <li>13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li> <li>14. Amount received during reporting period (Line 5, Total Contributions &amp; Other Receipts)</li> <li>15. SUBTOTAL Add lines 13 and 14</li> <li>16. Amount expended during reporting period (Add lines 9 and 11)</li> <li>17. ENDING BALANCE (Subtract line 16 from line 15)</li> </ul>	BALANCE STATEMENT  (13.) \$ 1554.65  (14.) + \$ 0  (15.) = \$ 1554.65  (16.) - \$ 364.00  (17.) \$ 1190.65  *	



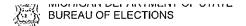
#### ITEMIZED EXPENDITURES **SCHEDULE 1B** CANDIDATE COMMITTEE

1. Committee I. D. Number 150688

2 Committee Name Committee To Elect Andrew Niedzinski

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Friends of Dan Kildee		2/20/14	o 100 00
	Purpose: Fundraiser	Date	\$ <u>100.00</u>
PO. Box 240			
Flint MI 48506	Click	Here for Memo	Itemization Type 🗘
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Saginaw Area Democratic Club		2/22/14	\$ 15.00
Address	Purpose: Fundraiser	Date	10.00
Address 318 S. Hamilton st	Purpose.		
Saginaw Mi 48602	Click	Here for Memo	Itemization Type 🕻
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Bay County Democratic Party		3/2/14	
	Fundraiser	Date	\$20.00
Address 5265 2 Mile rd	Purpose: Fundraiser		-
Bay City, MI 48706	Click F	lere for Memo	Itemization Type 🗘
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Bay County Democratic Party		5/01/14	
Address	Purpose: Advertisement	Date	\$ <u>139.00</u>
5265 2 Mile rd	Purpose: /tavortiooriioit		
Bay City, MI 48706	Click F	lere for Memo	Itemization Type 🗘
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Nick Wilcox		C (O (4 A	
	Purpose: Created Advertisement	5/9/14 Date	\$50.00
Address 5123 3 Mile rd	Purpose: Orogica / lavoritocimoni	Date	
Bay City, MI 48706	l <del></del> -	lere for Memo	Itemization Type 🗘
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	324.00
	Grand Total of all S	Schedules 1B	
	(Complete on last page		

Enter this total on line 8a of Summary Page



### **ITEMIZED EXPENDITURES SCHEDULE 1B** CANDIDATE COMMITTEE

1. Committee I. D. Number 150688

2. Committee Name Committee To Elect Andrew Niedzinski

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Friends of Don Tilley		2/27/14	
•		Date	\$ <u>40.00</u>
Address 617 /2/PCA ALLE	Purpose: Fundraiser		
Bay C.tg, MI 48708	Click Here for Memo Itemization Type 🗘		
0) ) (10)	Check box if this expenditure is payment of		•
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name			•
		Date	\$
Address	Purpose:		
	Click Ho	ere for Memo	Itemization Type 🚷
	Check box if this expenditure is payment of		*
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name			
		Date	\$
Address	Purpose:	Date	
	Click He	ere for Memo	Itemization Type 🗘
	Check box if this expenditure is payment of		٠
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			ļ
	-	Date	\$
Address	Purpose:		
	Click He	re for Memo	Itemization Type 🗘
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5	Statement		
Name			
	_		\$
Address	Purpose:	Date	<del></del>
	Click He	re for Memo	Itemization Type 😯
_	Check box if this expenditure is payment of debt or obligation reported on previous		. [
Fund Raiser	statement		
	Subtota	l this page	40.00
	Grand Total of all So	hedules 1B	
	(Complete on last page of		364.00
			Enter this total

on line 8a of Summary Page